PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10601000

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20-		(Coldinii Z)		r		 	OR I I		
			21		AUDITED EVED			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			37-mi	nus 20=	*	13		X\$ 9=		OR	X\$18=	306-
INDEPENDENT CLAIMS			5 minus 3 = 2			_		X42=		OR	X84=	168-
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	1224	
CLAIMS AS AMENDED - PART II											OTHER	THAN
						(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	-
	Independent	* NTATION OF M	Minus	***	C A A I A	=		X42=		OR	X84=	
	FINOT PRESE	MATION OF W	OLTIPLE DE	PENDEN	CLANVI	ا ا		+140=	*	OR	+280=	
				•			L	TOTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	А	DDIT. FEE			ADDIT, FEE	
В		CLAIMS	T	HIGH	(EST		Г		ADDI-			ADDI-
AMENDMENT E		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	5 04 4 18 4	-		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENI	CLAIM			+140=		OR	+280=	
							·	TOTAL DDIT. FEE	,		TOTAL ADDIT, FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)		DD11.1 CC1			ADDII. I EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=				
lacksquare	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		-	A4Z=	* /	OR	X84=	
	# If the control is control to be a threather than the second of the sec									OR	+280≃	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE											1. 3.	
		imber Previously P aber Previously Pa					r four	nd in the and	oronriate ho	in col	lumn 1	